

Attorney's File Number: P03191

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below-named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- ☒ original
- ☐ design
- ☐ divisional
- ☐ continuation
- ☐ continuation-in-part (CIP)

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Bacterial Attachment Reduction to Biomaterials and Biomedical Devices

the specification of which is attached hereto.

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

PRIORITY CLAIM (35 U.S.C. §119)

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

 X no such applications have been filed.
 such applications have been filed as follows:

**PRIOR FOREIGN/PCT APPLICATION(S) FILED WITHIN 12 MONTHS
 (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION
 AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. §119**

| Country | Application Number | Date of Filing (day, month, year) |
|---------|-----------------------|--------------------------------------|
| | | |
| | | |

**CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATION(S)
UNDER 35 U.S.C. §120**

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national filing date of this application.

| US Applications | US Filing Date | Status (check one) | |
|-----------------|----------------|--------------------|---------|
| | | Patented | Pending |
| | | | |
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I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

| <u>US Application</u> | <u>US Filing Date</u> |
|-----------------------|-----------------------|
| 1. 60/414,958 | September 30, 2002 |
| 2. | |

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Denis A. Polyn, Registration No. 27,152
Craig E. Larson, Registration No. 27,917
Katherine McGuire, Registration No. 33,537
Glenn D. Smith, Registration No. 42,156
Michael L. Smith, Registration No. 35,685
John E. Thomas, Registration No. 34,070
Rita D. Vacca, Registration No. 33,624

Send correspondence to:

John E. Thomas
Law Department
Bausch & Lomb Incorporated
One Bausch & Lomb Place
Rochester, NY 14604-2701

Direct telephone calls to:

(585) 338-8969

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

SIGNATURE(S)

Full name of sole or first inventor: Roya Borazjani

Inventor's signature: _____

Date: _____ Country of Citizenship: USA

Residence: 149 Greystone Lane, Apt. 13, Rochester, New York 14618 USA

Post Office Address: Same

Full name of second joint inventor, if any: Daniel M. Ammon, Jr.

Inventor's signature: _____

Date: _____ Country of Citizenship: USA

Residence: 179 Hurstbourne Road, Rochester, New York 14609 USA

Post Office Address: Same

Full name of third joint inventor, if any: Joseph C. Salamone

Inventor's signature: _____

Date: _____ Country of Citizenship: USA

Residence: 740 NW 6th Street, Boca Raton, Florida 33486 USA

Post Office Address: Same

Full name of fourth joint inventor, if any: Zhenze Hu

Inventor's signature: _____

Date: _____ Country of Citizenship: USA

Residence: 28 Wenham Lane, Pittsford, New York 14534 USA

Post Office Address: Same

Full name of fifth joint inventor, if any: Dharmendra M. Jani

Inventor's signature: _____

Date: _____ Country of Citizenship: USA

Residence: 53 East Squire Drive, #6, Rochester, New York 14623 USA

Post Office Address: Same